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FACSIMILE COVER SHEET

TO: Examiner James A. Thompson
U. S. Patent & Trademark Office
Group Art Unit 2624

FROM: Frank L. Cire (Reg. No. 42,419)

RE: U.S. Application No. 09/759,234
Atty. Docket No.: 03670.000006

FAX NO.: (571) 273-8300

DATE: November 10, 2005

NO. OF PAGES: 20
(including cover page)

TIME: 4:48 pm

SENT BY: Dawn M.

MESSAGE**Attachment:**

- 1) Transmittal; and
- 2) Amendment after Final Rejection and Statement of Substance of Interview.

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In re Application of:

KIYOSHI OLA, et al.

Application No.: 09/759,234

Filed: January 16, 2001

For: PHOTOGRAPH RECORD AUTHORIZING SYSTEM

Docket No.

03670.000006

Examiner: James A. Thompson

Group Art Unit: 2624

Date: November 10, 2005

Mail Stop Amendment
 Commissioner for Patents
 P.O. Box 1450
 Alexandria, VA 22313-1450

Sir:

Transmitted herewith is an Amendment in the above-identified application.

☒ No additional fee is required.

The fee has been calculated as shown below

CLAIMS AS AMENDED						
	(2) CLAIMS REMAINING AFTER AMENDMENT		(4) HIGHEST NO. PREVIOUSLY PAID FOR	(5) PRESENT EXTRA	RATE	ADDITIONAL FEE
TOTAL CLAIMS	140	MINUS	140	= 0	x \$9 \$18	\$.00
INDEP. CLAIMS	6	MINUS	3	= 0	x \$44 \$88	\$.00
Fee for Multiple Dependent claims \$150/\$300						
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT--						\$.00

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Frank L. Cire (Reg. No. 42,419)
 (Name of Attorney for Applicant)

Signature

November 10, 2005
 Date of Signature

- ☐ Verified Statement claiming small entity status is enclosed, if not filed previously.
- ☐ A check in the amount of \$_____ is enclosed.
- ☐ Charge \$_____ to Deposit Account No. 06-1205. A duplicate copy of this sheet is enclosed.
- ☒ Any prior general authorization to charge an issue fee under 37 C.F.R. 1.18 to Deposit Account No. 06-1205 is hereby revoked. The Commissioner is hereby authorized to charge any additional fees under 37 C.F.R. 1.16 and 1.17 which may be required during the entire pendency of this application, or to credit any overpayment, to Deposit Account No. 06-1205. A duplicate copy of this paper is enclosed.
- ☐ A check in the amount of \$_____ to cover the fee for a _____ month extension is enclosed.
- ☐ A check in the amount of \$_____ to cover the Information Disclosure Statement fee is enclosed.
- ☒ Applicants' undersigned attorney may be reached in our Costa Mesa, California office by telephone at (714) 540-8700. All correspondence should continue to be directed to our address given below.

Respectfully submitted,


Attorney for Applicants
Frank L. Cire
Registration No.: 42,419

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Form #120

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CENTRAL FAX CENTER**NOV 10 2005**Response Under 37 CFR § 1.116
Expedited Procedure - Group 2624

03670.000006

PATENT APPLICATION

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of:)
: Examiner: James A. Thompson
KIYOSHI OKA, ET AL.)
: Group Art Unit: 2624
Application No.: 09/759,234)
: Filed: January 16, 2001)
: For: PHOTOGRAPH RECORD)
AUTHORIZING SYSTEM : November 10, 2005

Mail Stop AF
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

AMENDMENT AFTER FINAL REJECTION AND
STATEMENT OF SUBSTANCE OF INTERVIEW

Sir:

In response to the Office Action dated September 13, 2005, please amend
the above-identified application as follows.

I hereby certify that this correspondence is being facsimile transmitted to
the Patent and Trademark Office on:

November 10, 2005
(Date of Transmission)

Frank L. Cite (Reg. No. 42,419)
(Name of Attorney for Applicant)

November 10, 2005
Date of Signature